

BUY™

SELL™

SHOP™



Downloaded From
www.TextBookDiscrimination.com



SELL YOUR OWN SAMPLES

(help others get the justice that they deserve)



BUY™

SELL™

SHOP™

www.TextBookDiscrimination.com

Get ***Booked Up*** on Justice!

© TBD Corporation. All Rights Reserved.

SEND ALL COURT NOTICES TO:

APPEARANCE BOND

Power No. X6-0108219

STATE OF FLORIDA

v. Shellie Zimmerman (Principal)

FILED IN OFFICE OF
MARYANNE MORRIS
CLERK CIRCUIT COURT
12 JUN 13 AM 10:21
SEMINOLE CO., FL

MAGIC BAIL BONDS

1610 Tropic Park Dr.

TRANSFER BOND, Sanford, FL 32773

407-323-0000

Circuit In The _____ Court
Seminole _____ County
STATE OF FLORIDA

We, Shellie Zimmerman (Principal's Name) 12CF1792A, as principal and **U.S. SPECIALTY INSURANCE COMPANY**, an insurer authorized to do business in the State of Florida, as surety, are hereby held and firmly bound unto the Governor of the State of Florida and his successors in office, for the said Principal in the Sum of \$ 1000 and the said surety for a like amount, and for the payment thereof we hereby bind ourselves, our heirs, executors, administrators and assigns.

The condition of this obligation is such that if the said principal shall appear on 7/31 20 12,

or at the next Regular or Special term of the above entitled Court and shall submit to the said Court to answer a charge of

Perjury and shall submit to orders and process of said Court and not depart the same without leave, then this obligation to be void, else to remain in full force and virtue. This bond is not valid for pre-sentence investigation, pre-trial intervention or countermeasure program unless specifically authorized by surety.

Signed and sealed this 12 day of June 20 12

By: [Signature] (PRINCIPAL)
Executing Agent (Attorney-In-Fact) For:
U.S. Specialty Insurance Company
601 S. Figueroa Street • Suite 1600 • Los Angeles, CA 90017 • (310) 649-2663
National Managing General Agent:
SURETY CORPORATION OF AMERICA
1000 NW 14th Street • Miami, FL 33136 • TOLL FREE: 877-722-2245



TAKEN BEFORE ME AND APPROVED:

Sheriff DONALD ESLINGER

By: D/O BALKCOM

I, Boyle Chapman am a duly licensed bail bondsman pursuant to chapter 903, Florida Statutes, or a duly licensed general lines agent pursuant to Part II of chapter 626, Florida Statutes, and have registered for the current year with the Sheriff and Clerk of the Circuit Court of the aforesaid County, and have filed a certified copy of my appointment by Power of Attorney for the Surety with the office of the Sheriff and Clerk of the Circuit Court of the aforementioned County and under penalty of perjury attest:

Bond Principal: Shellie Zimmerman Address: _____ City: _____ State: _____ Zip: _____

has (given or promised to give) the sum of _____ (\$ 100) Dollars as consideration for the Bail Bond issued under the Power Number set forth above and filed with the Clerk of the above Court located in the above County together with the (promise or receipt of) security belonging to

_____ (name) as follows: ☒ Indemnity Agreement ☐ Promissory Note ☐ Mortgage & Contingent Promissory Note ☐ Vehicle Lien ☐ Cash/Credit Card

Other property as collateral (Detailed description) _____

and that a duly signed receipt has been given to the said Principal for the consideration given and/or that _____ (name) has (also been) given a receipt for the security described above.

(Bondsman Signature) [Signature] Address _____ Phone _____

Send to: _____

CERTIFICATE OF DISCHARGE OF BOND

U.S. Specialty Insurance Company

601 S. Figueroa Street • Suite 1600 • Los Angeles, CA 90017 • (310) 649-2663

National Managing General Agent:

SURETY CORPORATION OF AMERICA

1000 NW 14th Street • Miami, FL 33136 • TOLL FREE: 877-722-2245

Case Number _____ Bond Amount _____ Power No. _____

Defendant: _____ Court: _____

This is to certify that on or about the _____ day of _____ 20 _____ I examined the court records regarding the above named Defendant and found that the bond with corresponding power number has been discharged of record by reason of the following disposition:

Person rendering decision: _____ Date of Discharge _____

Witness my hand and official seal this _____ day of _____, 20 _____ Signature _____ Title _____

POWER OF ATTORNEY

VOID IF NOT USED BY:

May 08 2013

U.S. SPECIALTY INSURANCE COMPANY

601 S. Figueroa Street • Suite 1600
Los Angeles, CA 90017 • (310) 649-2663

Exclusive National Managing General Agent:

SURETY CORPORATION OF AMERICA

1000 NW 14th Street • Miami, Florida 33136

TOLL FREE: 877-722-2245

POWER NUMBER

X6-0108219

POWER AMOUNT

\$6,000.00

FOR STATE USE ONLY

NOT VALID IN FEDERAL COURTS

KNOW ALL MEN BY THESE PRESENTS that U.S. Specialty Insurance Company, a corporation duly organized and existing under the laws of the State of Texas and by the authority of the Resolution adopted by the Board of Directors by unanimous consent on May 30, 2003 which said Resolution has not been amended or rescinded, does hereby appoint and by these presents make, constitute and appoint the named Executing Agent its true and lawful Attorney-in-Fact for it and in its name, place and stead to execute, seal and deliver for and on its behalf and as its act and deed, as surety, a bail bond only. Authority of such Attorney-in-Fact is limited to appearance bonds and cannot be construed to guarantee defendant's future lawful conduct, adherence to travel limitation, fines, restitution, payments or penalties, or any other condition imposed by a court not specifically related to court appearance.

This Power of Attorney is for use with BAIL BONDS only. Not valid if used in connection with Immigration Bonds. This Power is void if altered or erased or used with other powers of this Company or in combination with powers from any other surety company, void if used to furnish bail in excess of the stated amount of this Power and can be used only once. The obligation of the Company shall not exceed the sum of:

SIX THOUSAND DOLLARS

and provided this Power-of-Attorney is filed with the bond and retained as a part of court records. The said Attorney-in-Fact is hereby authorized to insert in this Power-of-Attorney the name of the person on whose behalf this bond was given. A separate Power-of-Attorney must be attached to each bond executed.

IN WITNESS WHEREOF, U.S. SPECIALTY INSURANCE COMPANY has caused these presents to be signed by its duly authorized officers, proper for the purpose and its corporate seal to be hereunto affixed this 12 day of June, 2012.

☐ TRANSFER BOND (SCA APPROVAL REQUIRED) Liable Agent: _____

☐ RE-WRITE Original Power # _____ Amount _____

Bond Amount \$ 1,000

Defendant Shelle Zimmerman

Charges Perjury

Charges _____

Court Circuit Date 7/31/12

Case No. _____

City Sanford County Seminole State FL

By: Frank M. Lanak

Frank M. Lanak, Vice President

By: Scott D. Anschultz

Scott D. Anschultz, Assistant Vice President



ATTORNEY-IN-FACT (Executing Agent)

[Signature]
(Signature)
By: [Signature]
(Print Name)

CLERK OF COURT: IF BOND FORFEITS, ATTACH A COPY OF THIS POWER TO THE FORFEITURE NOTICE AND SEND TO U.S. SPECIALTY INSURANCE COMPANY AT THE ABOVE ADDRESS AND TO THE EXECUTING AGENT AT:

MAGIC BAIL BONDS

1610 Tropic Park Dr.

Sanford, FL 32776

407-323-0000

City _____ State _____ Zip _____

It is unlawful to print or reproduce this form without the consent of U.S. Specialty Insurance Company.

Designed By: PSR © 2009 Surety Corporation of America, Exclusive National Managing General Agent for U.S. Specialty Insurance Company

White - Court

Gold - Agent

Yellow - Insurance Company

Pink - General Agent

BUY™

SELL™

SHOP™



Downloaded From
www.TextBookDiscrimination.com



SELL YOUR OWN SAMPLES

(help others get the justice that they deserve)



BUY™

SELL™

SHOP™

www.TextBookDiscrimination.com

Get ***Booked Up*** on Justice!

© TBD Corporation. All Rights Reserved.